

Making smoking cessation a game increases abstinence among smokers not yet ready to quit

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How can smokers who aren't yet ready to quit be motivated to do so?
According to a study co-authored by UMass Chan Medical School

researchers, smokers in a randomized clinical trial were nearly twice as likely to stop after participating in a technology-assisted abstinence game, compared with those who only received nicotine replacement lozenges to manage cravings. The study was published in *JAMA Internal Medicine*.

Participants who received the abstinence game [intervention](#) made their first attempt at quitting sooner than the comparison group. And at the six-month follow-up, 18% of game intervention participants and 10% of comparison group participants obtained carbon monoxide level-verified smoking cessation, indicating they hadn't smoked in the previous seven days.

Rajani S. Sadasivam, Ph.D., professor of population and quantitative health sciences and principal investigator, said the study aimed to make smoking cessation more palatable by framing it as a game.

In 2020, 12.5% of the United States population smoked cigarettes, according to the U.S. Centers for Disease Control and Prevention, down from a peak of roughly half the population in the 1950s. But the decline in smoking and its related health impacts has not reached everybody equally.

"Socioeconomically disadvantaged groups still smoke a lot," said Dr. Sadasivam. "That's what our group has been trying to figure out: How do we increase the reach of our interventions to these groups?"

A total of 433 smokers who were not ready to quit were enrolled in the trial, which took place in four U.S. health care systems. Of the participants, 48% were men and 52% were women, with a mean age of 54. The sample included participants from vulnerable socioeconomic groups (e.g., income concerns, unemployment) and 75% had not completed college.

Participants were randomly assigned to either the Take a Break (TAB) intervention or comparison group. All participants were offered nicotine replacement lozenges.

The TAB intervention was a three-week game experience. It included daily motivational text messaging, challenge quizzes assessing smoking behavior, brief abstinence goal setting, choice of mobile health apps for cravings management and reward points for participation that determined the level of a gift card provided at the end of the study.

Participants in the comparison group received daily text messages assessing the number of [cigarettes](#) smoked but did not receive the automated motivational replies to reinforce engagement and did not receive recognition points or participation rewards.

Sadasivam said smoking-cessation interventions have traditionally been targeted to people who indicated they wanted to quit. This study gives more options for people who aren't yet ready to commit.

"There are not many interventions out there, so this adds to that literature of trying to help these people," Sadasivam said. "This intervention can prepare them to quit, even if it's not immediate, in the long term. They understand about strategies they can use and they understand about nicotine replacement sampling and how to use it."

More information: Thomas K. Houston et al, Effect of Technology-Assisted Brief Abstinence Game on Long-term Smoking Cessation in Individuals Not Yet Ready to Quit, *JAMA Internal Medicine* (2022). [DOI: 10.1001/jamainternmed.2021.7866](https://doi.org/10.1001/jamainternmed.2021.7866)

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